



COMMUNICATION IN HEALTHCARE

Dr. (Brig) AP Pandit¹ | Mr. Shahin Basheer² | Ms. Anjali Makhijani³

¹ MD (HA) DNB (H&HA), Professor, Symbiosis Institute of Health Sciences, S B Road, Pune-411004.

² BSc (Nursing) MBA (HHM), Symbiosis Institute of Health Sciences, S B Road, Pune-411004.

³ BSc (BioTech), Student of MBA (HHM), Symbiosis Institute of Health Sciences, S B Road, Pune-411004.

ABSTRACT

Communication is the most important component of healthcare professionals. A good and an effective exchange between people help them see what the other person thinks and how he or she feels. It helps people understand each other better and, as a result, it brings them closer to each other. The significance of effective communication to the quality of patient care is immeasurable. Patients who grasp what their caregivers are saying are more likely to understand and follow treatment, modify life choices and everyday behaviors, and adhere to follow-up instructions. Communication in medical care is highly correlated with better patient adherence, and training physicians to communicate better, enhances their patients' healthcare outcome. Findings contribute to medical education and interventions to improve adherence, supporting arguments that, communication is important and resources devoted to improving communication are worth investing in. Doctor-patient communication is a major component of the process of health care. Doctors with better communication and interpersonal skills are able to detect problems earlier, can prevent medical crises and expensive intervention, and provide better support to their patients.

KEY WORDS: Health Care Workers (HCW), Communication, Healthcare,

INTRODUCTION:

Effective doctor-patient communication is a central clinical function in building a therapeutic doctor-patient relationship, which is the heart and art of medicine. This is important in the delivery of high-quality health care. Much patient dissatisfaction and many complaints are due to a breakdown in the doctor-patient relationship. However, many doctors tend to overestimate their ability in communication. Communication between healthcare professionals can affect patient care outcomes. Many challenges remain to effective communication among caregivers. Members of the health care community need to investigate these challenges and implement solutions that fit particular work areas and requirements. More research is needed to evaluate potential solutions and successful options. All caregivers have a responsibility to improve communication as a vital component of professional practice. Doctor-patient communication has been shown to be fundamental in clinical practice, and the main goals of communication have been to create good interpersonal relationships, to facilitate the exchange of information, and to include patients, in decision-making process.

Good communication is very important which helps health professionals to identify those individual needs. Fortunately, the modern perspective emphasizes that the doctor (and generally all health professionals) and the patients, need to work together as a team. A good communicator listens to his patient. He doesn't interrupt her but he actively, emphatically tries to understand what she is talking about. He asks open-ended questions and he tries to learn things not only about the illness but also about the patient as an individual. He tries to understand the patient's point of view even if he disagrees with the patient & never criticizes the patient. He doesn't command, warns, judge the patient, or tells the patient, what has to be done.^[1]

The communication between patient and health professionals are not always easy. Many times health professionals have to face different dilemmas in their interaction with patients that can cause them different and conflicting feelings. Shall the doctor disclose the diagnosis to the patient or not? Shall he tell her the truth or hide it from her? How about breaking bad news? What's the doctor's answer to the patient's question "Am I dying?" And what if the family wants different things from what the patient does? To whom will the doctor need to listen? The above questions are, just some of many dilemmas the doctor needs to face and make a decision about. This decision is not easy to make and the answer is not a specific one. By informing the patient and telling the truth, he may get upset, which is not a desirable thing. On the other hand, by not telling the patient, how things really are, the patient doesn't get the truth, which is not a good thing either. So what is the right thing to do? Inform or conceal the truth?

Over the years, much has been published in the literature on this important topic. Research evidence indicates that there are strong positive relationships between healthcare team members' communication skills and a patient's capacity to follow medical recommendations, self-manage a chronic medical condition, and adopt preventive health behaviors. Studies conducted during the past three decades show that the clinician's ability to explain, listen and empathize can have a profound effect on biological and functional health outcomes as well as patient satisfaction and experience of care. Doctor-patient communication is a major

component of the process of health care. Doctors are in a unique position of respect and power. Hippocrates suggested that doctors may influence patients' health. Effective doctor-patient communication can be a source of motivation, incentive, reassurance, and support. A good doctor-patient relationship can increase job satisfaction and reinforce patients' self-confidence, motivation, and positive view of their health status, which may influence their health outcomes.

Doctor-patient communication is a major component of the process of health care. Doctors with better communication and interpersonal skills are able to detect problems earlier, can prevent medical crises and expensive intervention, and provide better support to their patients.

Aim:

To identify and understand the importance of good communication between patient and health professionals

Objective:

To recognize and emphasize whether good Health Care Worker (HCW) – patient communication has an impact on better health outcomes, higher compliance to therapeutic regimens in patients, higher patient and clinician satisfaction between patients and health care professionals

Scope of the study:

This is a review study, based on the information collected from secondary data.

LITERATURE REVIEW:

Patient's perceptions of the quality of the healthcare they received are highly dependent on the quality of their interactions with their healthcare clinician and team. There is a wealth of research data that supports the benefits of effective communication and health outcomes for patients and healthcare teams. The connection that a patient feels with his or her clinician can ultimately improve their health mediated through participation in their care, adherence to treatment, and patient self-management. It is estimated that one-third of adults with chronic illnesses underused their prescription medication due to cost concerns, yet they fail to communicate this information to their physician. Another study found that less than half of hospitalized patients could identify their diagnosis or the names of their medication(s) at discharge, an indication of ineffective communication with their physicians. The Institute of Medicine (IOM) report on Health Professions and Training has identified that doctors and other health professionals lack adequate training in providing high-quality healthcare to patients. The IOM called upon educators and licensing organizations to strengthen health professional training requirements in the delivery of patient-centered care. The patient-centered care model underscores the essential features of healthcare communication which rely heavily on core communication skills, such as open-ended inquiry, reflective listening, and empathy, as a way to respond to the unique needs, values and preference of individual patient^[2]

Prof. Samuel YS Wong and Prof. Albert Lee (2006) put forwards various observations made on communication skills and doctor-patient relationship. Having good communication skills is essential for doctors to establish a good doctor-

patient relationship. With the increase in demand from patients who value doctors who are patient centered (who spend time and listen to them), together with the rise of consumerism in medicine, health service research on doctor-patient relationship has become an important area of interest for both medical researchers and administrators alike. The recognition of the importance of doctor-patient relationship and communication in medicine has particular relevance for primary care physician whose discipline has long focused on the importance of the doctor-patient relationship ends-up with quality health care delivery. Not surprisingly, many undergraduate and postgraduate medical education and training programs have made the attainment of good communication skills a co-requirement.

Good doctor-patient communication is important and has multiple impacts on various aspects of health outcomes. The impacts included better health outcomes, higher compliance to therapeutic regimens in patients, higher patient and clinician satisfaction and a decrease in malpractice risk.

Conducting research in identifying the importance of communication between doctor and patient may help clinicians, educators and health service administrators to better understand the doctor- patient relationship and doctor- patient communication that is unique in our culture and social settings. This will provide a framework and foundation from which further studies on effective intervention that aims to improve doctor-patient relationship can be conducted. This is a particularly important issue for family physicians.^[3]

Communication is an important component of patient care. However, doctors are generally not given any specific training in how to communicate well with patients. Traditionally, communication in medical school curricula was incorporated informally as part of rounds and faculty feedback, but without a specific or intense focus on skills of communication per se. It has been shown that good doctor-patient communication has an impact on better health outcomes, higher compliance to therapeutic regimens in patients, higher patient and clinician satisfaction, and a decrease in malpractice risk. It is the need of time to conduct more research in this area and to actively include teaching the art of communication skills in undergraduate and postgraduate Medical learning programs for the benefit of both the doctor and the patient.

Good doctor-patient communication is important and has multiple impacts on various aspects of health outcomes. The impacts included better health outcomes, higher compliance to therapeutic regimens in patients, higher patient and clinician satisfaction, and a decrease in malpractice risk. Although medical education has only recently realized to emphasize the importance of communication between doctor and patient, and started to include the teaching of communication skills in many undergraduate and postgraduate learning program, it is still in its infancy in India. With the increase in malpractice claims against doctors, together with the increase in the volume of complaints and enquiries received by the regulatory bodies, and a rise in consumerism in medicine, good doctor-patient communication is becoming even more important. Conducting research in this area may help clinicians, educators, and health service administrators to better understand the doctor-patient relationship and doctor-patient communication that is unique in our culture and social settings.^[4]

Effective doctor-patient communication is a central clinical function in building a therapeutic doctor-patient relationship, which is the heart and art of medicine. Much patient dissatisfaction and many complaints are due to breakdown in the doctor-patient communication. Many doctors tend to overestimate their ability in communication. Over the years, much has been published in the literature on this important topic. A doctor's communication and interpersonal skills encompass the ability to gather information in order to facilitate accurate diagnosis, counsel appropriately, give therapeutic instructions, and establish caring relationships with patients. Basic communication skills in isolation are insufficient to create and sustain a successful therapeutic doctor-patient relationship, which consists of shared perceptions and feelings regarding the nature of the problem, goals of treatment, and psychosocial support.

Doctor-patient communication is a major component of the process of health care. Doctors are in a unique position of respect and power. Effective doctor-patient communication can be a source of motivation, incentive, reassurance, and support.. Most complaints about doctors are related to issues of communication, not clinical competency. Patients want doctors who can skillfully diagnose and treat their sicknesses as well as communicate with them effectively. Doctors with better communication and interpersonal skills are able to detect problems earlier, can prevent medical crises and expensive intervention, and provide better support to their patients. This may lead to higher-quality outcomes and better satisfaction, lower costs of care, greater patient understanding of health issues, and better adherence to the treatment process.

There is currently a great expectation of collaborative decision making, with physicians and patients participating as partners to achieve the agreed upon goals and the attainment of quality of life.^[5]

Inadequate communication as patient's transition across venues of care carries substantial risks. At the time of discharge, changes in medications may be missed, abnormal or pending test results ignored, and evolving aspects of the

patient's condition may not receive appropriate attention. Given the importance, it could be assumed that communication with the primary care physician (PCP) is a routine staple of hospitalization and performed in a systematic manner along with other essential items, such as assessment of allergies and documentation of prior laboratory results. On the contrary, the inconsistent nature of physician-physician communication is well-established. A systematic review of the literature found that direct communication between inpatient physicians and PCPs occurred only in 20% of hospitalization cases.

Though the consequences of inadequate communication have been repeatedly demonstrated, the gains from enhanced communication have not been as clearly proven. The lack of definitive data may be due to inability to control for important confounders, inadequate power, and inability to assess the quality of the communication, or intrinsic difficulties with communication preventing meaningful improvement in outcomes. In addition, most studies have examined the transfer of information at the end of hospitalization, and little emphasis was given on communication at the time of admission. Benefit as shown in a randomized trial which found that an intervention to facilitate the transition from hospital to home, including a comprehensive discharge form completed by a discharge planning nurse and electronically transmitted to a nurse at the PCP's office, markedly decreased the number of incomplete workups, though ED visits and readmissions were unchanged. A concern is that the rapid growth of the hospitalization model may further exacerbate discontinuity of care. The use of hospitalists has expanded rapidly as fewer PCPs care for their hospitalized patients, due to the need to achieve maximum productivity in the office, increasingly complex inpatient management, and increased pressure to minimize length of stay.

A more systemic approach with potentially great impact would entail promoting widespread availability of health information technology (HIT) to allow providers to access information across venues and seamlessly integrate communication into the workflow of patient care. High-quality communication between inpatient and outpatient physicians is essential to ensure patient safety during transitions. Studies have focused primarily on the discharge summary and have consistently shown the need for improvement. However, hospitalists and other inpatient physicians need to consider the discharge summary as a single method of interacting with their outpatient colleagues, and recognize that important information can be transmitted at admission and throughout hospitalization. Technological advances have made a myriad number of options available, including e-mail, fax, text messaging, and EMRs. Whether communication occurs via high-tech methods or simply by picking up the phone, these discussions need to become engrained in the culture and behavior of inpatient physicians.^[6]

METHODOLOGY:

A study was conducted for the purpose of identifying the importance of good HCW-patient communication. 6 articles were reviewed for the same. Articles were analyzed based on the aspects of communication with patients, physicians, patient satisfaction, and patient adherence. The factors which determined were the content, structure, and function of the relationship between HCW and patients.

Observations:

Medicine involves the integration of not only art and science but also magic and creative ability, and the building of a harmonious patient-physician relationship reflects this artistic quality. Studies have found that attentive and respectful listening in communication reinforced the healing process and positively affected patient satisfaction; theatre training was effective at teaching clinical empathy; empathic responses during doctor-patient information exchanges were consistently associated with positive patient outcome, stable patient adherence, and symptom resolution; a physician's attention to a computer monitor, diminished dialogue between the physician and the patient was inversely correlated with the effect of communication; and audiovisual aids, such as figures, pictures, DVDs, and MP3 files, were helpful for transferring medical information, promoting doctor-patient communication, and improving patient comprehension, recall, and adherence.

Satisfaction needs to be investigated with a tightly defined and homogenous case mix to explore cause and effect of various factors on doctor-patient communication.

Physician-patient communication and patient adherence is an important aspect in the healthcare industry. Physician communication is positively related to adherence to several different regimens. Communication is an essential component of the medical care process, and through the therapeutic physician-patient relationship, patients are informed about their regimens, encouraged and supported in their motivation, and offered assistance in gathering and using needed resources. Patient non-adherence continues to be a challenge for medical professionals, patients, and researchers, however, with review evidence indicating that 25% to 50% of patients are non-adherent. A lack of consensus remains about the most important barriers to and strategies for achieving adherence.

Communication in medical care is highly correlated with better patient adherence, and training physicians to communicate better enhances their patients' adherence. Findings can contribute to medical education and to interventions to

improve adherence, supporting arguments that communication is important and resources devoted to improving it are worth investing in. Communication is thus an important factor over which physicians have some control in helping their patients to adhere. Research has shown that the way patients perceive their connection with their physician significantly influences their sense of satisfaction and level of concern about their health. In the fast-paced managed-care environment, relationship-building conversations can get lost in the pressure to perform. The demands of keeping abreast of the latest medical-treatment approaches can enhance the need to practice and improve communication skills. A good effective, empathic physician-patient communication leads to improved patient compliance, better clinical outcomes and reduction in "doctor-shopping" and malpractice litigations.

DISCUSSION:

The goal of good communication should be getting the best outcomes for patients. Seen in that light, the key for doctors improving their communication with patients is the quality of their communication with fellow clinicians. That's because good medical practice is a team effort. Even the best surgeon can watch his patient die of an infection, accident or error because communication breaks, amongst his team of professionals. These deadly mistakes are common, and often a rule rather than exception in many hospitals. An estimated one in four patients admitted to a hospital in America suffer some form of unintended harm, and more than 500 people die from hospital mishaps every day. Moreover, an estimated 80% of serious medical errors involve mis-communication between caregivers when patients are transferred or handed off. Good team communication is life or death for quality care for patients.

Doctors need to listen more and talk less. When meeting with patients, doctors shouldn't interrupt or dominate the conversation. Instead, doctors should ask open ended questions to encourage each patient to describe his or her feelings and concerns about their illness. When doctors take time to listen, the treatment decisions and care plans that they develop will better reflect their patients' wishes; in turn, those plans are more likely to be followed by patients. Towards the end of a visit, it's important for doctors to carefully listen for any patient questions or concerns, and to check for any misunderstandings or confusions. Studies show that up to 80% of the medical information that patients receive, is forgotten immediately and nearly half of the information retained is incorrect. To ensure each patient understands and remembers important information about their treatment, their doctor can ask him or her to describe the plan in their own words, a strategy known as the teach-back method.

The recognition of the importance of doctor-patient relationship and communication in medicine has particular relevance for primary care physician whose discipline has long focused on the importance of the doctor-patient relationship quality health care delivery. Not surprisingly, many undergraduate and postgraduate medical education and training program have made the attainment of good communication skills a core requirement. Proper communication with patients helps in:

- Improving health, functional and emotional status
- Better compliance with Medical treatment
- Improved patient satisfaction
- Improved clinician satisfaction
- Reduces Medical Malpractices

Good doctor-patient communication has the potential to help regulate patients' emotions, facilitate comprehension of medical information, and allow for better identification of patients' needs, perceptions, and expectations. Patients reporting good communication with their doctor are more likely to be satisfied with their care, and especially to share pertinent information for accurate diagnosis of their problems, follow advice, and adhere to the prescribed treatment.

RECOMMENDATIONS:

Communication skills involve both style and content. Attentive listening skills, empathy, and use of open-ended questions are some examples of skillful communication. Improved doctor-patient communication tends to increase patient involvement and adherence to recommended therapy; influence patient satisfaction, adherence, and health care utilization; and improve quality of care and health outcomes. Breaking bad news to patients is a complex and challenging communication task in the practice of medicine. Relationship building is especially important in breaking bad news. Important factors include understanding patients' perspectives, sharing information, and patients' knowledge and expectations.

Miscommunication has serious implications, as it may hinder patients' understanding, expectations of treatment, or involvement in treatment planning. In addition, miscommunication decreases patient satisfaction with medical care, level of hopefulness, and subsequent psychological adjustment. In order to build proper doctor-patient relationship and physician-physician relationship the following measures can be done.

- Communication Training
- Collaborative Communication

Collaborative communication is a reciprocal and dynamic relationship, involving the 2-way exchange of information. This requires the doctors to take time or set up opportunities to offer and discuss treatment choices to patients and share the responsibility and control with them. Successful information exchange ensures that concerns are elicited and explored and that explanations of treatment options are balanced and understood to allow for shared decision making.

➤ Conflict Management:

Conflict is often a challenging situation as it can evoke feelings of helplessness, frustration, confusion, anger, uncertainty, failure, or sadness. The doctor should recognize these feelings and develop skills to identify problematic responses in the patient or themselves to de-escalate the situation and enable the relationship problems to be turned into a clinical success.

➤ Health Beliefs:

Beliefs and values affect the doctor-patient relationship and interaction. Divergent beliefs can affect health care through competing therapies, fear of the health care system, or distrust of prescribed therapies. This perception gap may negatively affect treatment decisions and therefore may influence patient outcomes, despite appropriate therapy.

Communication in medical care is highly correlated with better patient adherence, and training physicians to communicate better enhances their patients' adherence. Findings can contribute to medical education and to interventions to improve adherence, supporting arguments that communication is important and resources devoted to improving it are worth investing in. Communication is thus an important factor over which physicians have some control in helping their patients to adhere.

CONCLUSION:

Doctor-patient communication is a major component of the process of health care. Doctors are in a unique position of respect and power. Hippocrates suggested that doctors may influence patients' health. Effective doctor-patient communication can be a source of motivation, incentive, reassurance, and support. A good doctor-patient relationship can increase satisfaction and reinforce patients' self-confidence, motivation, and positive view of their health status, which may influence their health outcomes. Most complaints about doctors are related to issues of communication, not clinical competency. Patients want doctors who can skillfully diagnose and treat their sicknesses as well as communicate with them effectively.

Doctors with better communication and interpersonal skills are able to detect problems earlier, can prevent medical crises and expensive intervention, and provide better support to their patients. This may lead to higher-quality outcomes and better satisfaction, lower costs of care, greater patient understanding of health issues, and better adherence to the treatment process. There is currently a greater expectation of collaborative decision making, with physicians and patients participating as partners to achieve the agreed upon goals and the attainment of quality of life.

Patients' perceptions may have a greater impact on their own outcomes than physician behavior, but their perceptions are subjective and subject to bias, and patients may be influenced by other factors such as their health status and state of mind and may not accurately reflect the reality of the communication in consultation.

Conflicts of Interest:

There is no conflict of interest.

Financial support and Sponsorship:

Study is not funded by any agencies.

Ethical Approval:

The study was under taken as a part of summer internship of management studies. There was no direct / indirect intervention on medication study of any human beings or animals and hence there was no ethical issues involved.

REFERENCES:

1. Markos Markides, MA. The Importance of Good Communication between Patient and Health Professionals, J PediatrHematolOncol Volume 33, Supplement 2, October 2011. Available at: www.jphe-online.com |S123
2. Impact of Communication in Healthcare. Institute of Healthcare Communication [Internet]. Available from: <http://healthcarecomm.org/aboutus/impact-of-communication-in-healthcare>.
3. YS Wong, Lee. Communication Skills and Doctor-patient Relationship. The Hong Kong Medical Diary. 2017; 2(3):7-9.
4. Shukla A, Singh V, Kastury N. Doctor-Patient Communication: An Important but Often Ignored Aspect in Clinical Medicine. Indian Academy of Clinical Medicine. 2010;11(3):208-211.
5. Fong HA J, Anat D, Longnecker N. Doctor - Patient Communication: A review. The Ochsner Journal. 2010; 10(1):38-43.
6. Dunn A, Markoff B. Physician-Physician Communication: What's the Hang-up? Journal of General Internal Medicine. 2009;24(3):437-439.